

Express Mail No.: EV 373446171 US  
 Date Deposited: 11/30/2004

PTO/SB/17 (10-04)  
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<b>IP FEE TRANSMITTAL for FY 2005</b> <small>Patent fees are subject to annual revision.</small>		<b>Complete if Known</b>	
		Application Number	10/662,155
		Filing Date	09/12/2003
		First Named Inventor	Donald E. Weder
		Examiner Name	E. Kim
		Art Unit	3721
TOTAL AMOUNT OF PAYMENT (\$ 110)		Attorney Docket No. 8403.988	

<b>METHOD OF PAYMENT (check all that apply)</b>		<b>FEE CALCULATION (continued)</b>																																																																																																																																																																																																																																																																																																																																																																																												
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<b>SUBMITTED BY</b> <table border="1"> <thead> <tr> <th>Name (Print/Type)</th> <th>Kathryn L. Hester, Ph.D.</th> <th>Registration No. (Attorney/Agent)</th> <th>46,768</th> <th>Telephone (405) 607-8600</th> </tr> </thead> <tbody> <tr> <td>Signature</td> <td><i>[Signature]</i></td> <td></td> <td></td> <td>Date 11/30/2004</td> </tr> </tbody> </table>		Name (Print/Type)	Kathryn L. Hester, Ph.D.	Registration No. (Attorney/Agent)	46,768	Telephone (405) 607-8600	Signature	<i>[Signature]</i>			Date 11/30/2004	<b>Complete if Known</b>		<b>Reduced by Basic Filing Fee Paid</b> <b>SUBTOTAL (3) (\$ 110)</b>																																																																																																																																																																																																																																																																																																																																																																																
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11/30/2004



Approved for use through 10/31/2002. OMB 0651-0031  
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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 8403.988										
Send to: Mail Stop Patent Ext. Commissioner for Patents PO Box 1450 Alexandria, VA 22313-1450	In re Application of Donald E. Weder											
	Application Number 10/662,155	Filed 9/12/03										
	For SYNTHETIC DECORATIVE GRASS SIMULATING SPANISH MOSS AND METHOD FOR MAKING SAME											
	Group Art Unit 3721	Examiner E. Kim										
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table><tr><td><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))</td><td>\$ 110.00</td></tr><tr><td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td><td>\$ _____</td></tr><tr><td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td><td>\$ _____</td></tr><tr><td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td><td>\$ _____</td></tr><tr><td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td><td>\$ _____</td></tr></table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number _____. I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> applicant/inventor</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record.</p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____.</p>			<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ 110.00	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ _____	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ _____	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ _____	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ _____
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<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ _____											

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

11-30-04

Date

Signature

Kathryn L. Hester, Ph.D.

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of \_\_\_\_\_ forms are submitted.